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Jan 24 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N33370 (0)

1. Corporation Name

INTERNATIONAL FRONTENNIS ASSOCIATION, CORP.



Principal Place of Business

Mailing Address

7501 N.W. 77TH STREET  
MIAMI FL 33166  
US7210 SW 86 AVE  
MIAMI FL 33143-9727

2. Principal Place of Business

2a. Mailing Address

21 8510 N W 70 ST.

26 9400 S. W. 77 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State  
23 Miami Florida27 City & State  
28 Miami Florida

24 Zip 33166 25 Country USA

29 Zip 33173 30 U.S.A.

3. Date Incorporated or Qualified

07/24/1989

3a. Date of Last Report

06/20/1996

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTINEZ, FERNANDO E.  
9400 SW 77 STREET  
MIAMI FL 33173

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME MORALES, SILVIO R.  
STREET ADDRESS 11880 SW 46 ST  
CITY-ST-ZIP MIAMI FL1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE TD  
NAME CASTRO, HUGO A.  
STREET ADDRESS 2100 W 76 ST  
CITY-ST-ZIP HIALEAH FL2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE VD  
NAME MARTINEZ, FERNANDO E.  
STREET ADDRESS 9400 SW 77 STREET  
CITY-ST-ZIP MIAMI FL 331733.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date (905) 592-6366 Daytime Phone 0030152

CR2E037 (9/96)